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Fill in this information to identify your case:			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION	4 .	ī	
Case number (if known)	Chapter you are filing under:		
.ab	Chapter 7		*
	☐ Chapter 11	,	
	☐ Chapter 12		
	☐ Chapter 13		Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Evelyn	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Davis	
	identification to your meeting with the trustee	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5532	

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Del	btor 1 Davis, Evelyn		Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	· · · · · · · · · · · · · · · · · · ·	If Debtor 2 lives at a different address:			
		15433 Ellis Ave Dolton, IL 60419-2755				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook	0			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Charlesse			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			
			·			

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Det	otor 1 Davis, Evelyn				_	Case number (if known)			
Par	t 2: Tell the Court About Y	our Bankı	ruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chapt	ter 7						
		☐ Chapt	er 11						
		☐ Chapt							
		☐ Chapt							
8.	How you will pay the fee	abo	out how yo	u may pay. Typically, if you are ey is submitting your payment or	paying the fee you	eck with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money or ur attorney may pay with a credit card or check with a	der.		
				y the fee in installments. If you		tion, sign and attach the Application for Individuals to Pay Ti	1e		
		□ 1 re	auest tha	at my fee be waived (You may	request this optio	on only if you are filing for Chapter 7. By law, a judge may, b ome is less than 150% of the official poverty line that applies	ut is to		
		you	ır family si:	ze and you are unable to pay the Chapter 7 Filing Fee Waived (O	e fee in installmer	nts). If you choose this option, you must fill out the Applicati	วก		
				3		,			
9.	Have you filed for	■ No.							
	bankruptcy within the last 8 years?	☐ Yes.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases	■ No							
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your	■ No.	Go to	line 12.					
	residence?	☐ Yes.	Has vo	our landlord obtained an eviction	iudament agains	st you and do you want to stay in your residence?			
		∟ 1€5.		No. Go to line 12.	,				
					About an Eviction	n Judgment Against You (Form 101A) and file it with this			
				bankruptcy petition.	Jul all Evoloti				

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Det	otor 1 Davis, Evelyn		· · · · · · · · · · · · · · · · · · ·	Case number (if known)
Par	t 3: Report About Any Bus	sinesses \	ou Own as a Sole Propriet	or
	Are you a sole proprietor		<u> </u>	
12.	of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of but	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a		Number, Street, City, Sta	te & ZIP Code
	separate sheet and attach it to this petition.		Check the appropriate ho	x to describe your business:
	to ano pounon.			ness (as defined in 11 U.S.C. § 101(27A))
				Estate (as defined in 11 U.S.C. § 101(51B))
			_ •	efined in 11 U.S.C. § 101(53A))
			_ ,	r (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	
				•
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	. If you indicate that you are a	court must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure in 11
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	4: Report if You Own or	Have Anv	Hazardous Property or Any	/ Property That Needs Immediate Attention
	<u> </u>			
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is the hazard?	
	safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code

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Debtor 1 Davis, Evelyn Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a briefing about credit counseling agency within the 180 days before I filed counseling. this bankruptcy petition, and I received a certificate of certificate of completion. The law requires that you Attach a copy of the certificate and the payment plan, receive a briefing about Attach a copy of the certificate and the payment plan, if any, if any, that you developed with the agency. credit counseling before you that you developed with the agency. file for bankruptcy. You must truthfully check one of I received a briefing from an approved credit I received a briefing from an approved credit the following choices. If you counseling agency within the 180 days before I counseling agency within the 180 days before I filed filed this bankruptcy petition, but I do not have a cannot do so, you are not this bankruptcy petition, but I do not have a certificate eligible to file. certificate of completion. of completion. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you If you file anyway, the court you MUST file a copy of the certificate and payment MUST file a copy of the certificate and payment plan, if any. can dismiss your case, you plan, if any. will lose whatever filing fee you paid, and your creditors can begin collection □ I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services services from an approved agency, but was from an approved agency, but was unable to obtain activities again. unable to obtain those services during the 7 those services during the 7 days after I made my days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what obtain the briefing, why you were unable to obtain it before efforts you made to obtain the briefing, why you were you filed for bankruptcy, and what exigent circumstances unable to obtain it before you filed for bankruptcy, and required you to file this case. what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied with case. your reasons for not receiving a briefing before you filed for Your case may be dismissed if the court is bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must file If the court is satisfied with your reasons, you must a certificate from the approved agency, along with a copy of still receive a briefing within 30 days after you file. the payment plan you developed, if any. If you do not do so, You must file a certificate from the approved agency, your case may be dismissed. along with a copy of the payment plan you developed, if any. If you do not do so, your case may be Any extension of the 30-day deadline is granted only for dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about counseling because of: credit counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency that I have a mental illness or a mental deficiency makes me incapable of realizing or making rational that makes me incapable of realizing or making decisions about finances. rational decisions about finances. Disability. Disability. My physical disability causes me to be unable My physical disability causes me to be unable to participate in a briefing in person, by phone, or through to participate in a briefing in person, by phone, the internet, even after I reasonably tried to do so. or through the internet, even after I reasonably tried to do so. ☐ Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a military military combat zone. If you believe you are not required to receive a briefing about If you believe you are not required to receive a briefing credit counseling, you must file a motion for waiver of credit about credit counseling, you must file a motion for counseling with the court. waiver credit counseling with the court.

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Deb	tor 1 Davis, Evelyn				Case number	(if known)		
Par	6: Answer These Questi	ons for Rep	porting Purposes					
16.	What kind of debts do you have?		16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c. -	State the type of debts you owe	that are not consume	r debts or business de	ebts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.				
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do y paid that funds will be available t			is excluded and administrative expenses are		
	administrative expenses are paid that funds will be		■ No	•				
	available for distribution to unsecured creditors?	•	☐ Yes					
18.	How many Creditors do you estimate that you	1-49		☐ 1,000-5,000		☐ 25,001-50,000 ☐ 50,001-50,000		
	owe?	☐ 50-99 ☐ 100-19	α	□ 5001-10,000 □ 10,001-25,00		☐ 50,001-100,000 ☐ More than100,000		
		200-99		,				
19.	How much do you estimate your assets to	\$0 - \$5	-•	□ \$1,000,001 -		☐ \$500,000,001 - \$1 billion		
	be worth?	_	1 - \$100,000 01 - \$500,000	□ \$10,000,001 □ \$50,000,001		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
_			01 - \$1 million	\$100,000,00	•	☐ More than \$50 billion		
20.	How much do you estimate your liabilities to	\$0 - \$5	•	\$1,000,001 -		□ \$500,000,001 - \$1 billion		
	be?		01 - \$100,000 01 - \$500,000	□ \$10,000,001 □ \$50,000,001		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			01 - \$1 million	\$100,000,00		☐ More than \$50 billion		
Pan	7: Sign Below							
For	you	I have exa	mined this petition, and I declare	under penalty of perj	ury that the information	n provided is true and correct.		
			hosen to file under Chapter 7, I de. I understand the relief availab			nder Chapter 7, 11,12, or 13 of title 11, United ceed under Chapter 7.		
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		l request r	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		case can	nd making a false statement, corresult in fines up to \$250,000, or	ncealing property, or of imprisonment for up	obtaining money or pro to 20 years, or both. 1	perty by fraud in connection with a bankruptcy 8 U.S.C. §§ 152, 1341, 1519, and 3571.		
		Evelyn [· · · · · · · · · · · · · · · · · · ·		Signature of Debtor	2		
		Executed			Executed on			
			MM / DD / YYYY		MM	DD / YYYY		

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Debtor 1 Davis, Evelyn	Case number (if known)						
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition Chapter 7, 11, 12, or 13 of title 11, United States Co person is eligible. I also certify that I have delivered	de, and have explained t	the relief available under each chapter for which the				
If you are not represented by an attorney, you do not need to file this page.	which § 707(b)(4)(D) applies, certify that I have no ke petition is incorrect.	nowledge after an inquir	y that the information in the schedules filed with the				
. •	Is/ Michael R. Richmond Signature of Attorney for Debtor	Date	June 26, 2017 MM / DD / YYYY				
	Michael R. Richmond						
	Heller & Richmond, Ltd.						
	33 N Dearborn St Ste 1907						
	Chicago, IL 60602-3828 Number, Street, City, State & ZIP Code						
	Contact phone (312) 781-6700	Email address	mrichmond@hellerrichmond.com				
	3124632 Bar number & State		<u> </u>				

(Jase 17-19282	DOC 1 F	_	06/27/17 cument	Entered 06/27/1 Page 8 of 52	.7 11:43:05	Des	с main
Fill in this info	ormation to identify you	case and this						
Debtor 1	Evelyn Davis							
Dahta - 0	First Name	Middle	Name		Last Name			
Debtor 2 Spouse, if filing)	First Name	Middle	Name		Last Name			
Jnited States	Bankruptcy Court for the:	NORTHER	N DISTI	RICT OF ILLIN	IOIS, EASTERN DIVISION			
Case number							ı	☐ Check if this is an
					-			amended filing
Schedun each category	Be as complete and accur nore space is needed, attacl	be items. List a ate as possible	. If two r	married people	n asset fits in more than one are filing together, both are e top of any additional pages,	equally responsible	e for supp	lying correct
	ibe Each Residence, Buildir	a Land or Oth	or Poal	Estato Vou Owr	or Have an Interest In			
□ No. Go to I	or have any legal or equitab Part 2. re is the property?	le interest in an	ny reside	ence, building, l	and, or similar property?			
I.1			What	is the property	? Check all that apply			
15433 E	Ellis Ave			Single-family h Duplex or mult				ns or exemptions. Put claims on <i>Schedule D:</i>
Street addre	ess, if available, or other description	on		Condominium	-	Creditors Who H	ave Claims	s Secured by Property.
Dolton	IL 60	419-2755		Manufactured (or mobile home	Current value of entire property?		Current value of the portion you own?
City	State	ZIP Code		Investment pro Timeshare	perty	\$102,00)0.00	\$102,000.00
				Other has an interest	in the property? Check one	(such as fee sin a life estate), if	nple, tenar	ur ownership interest ncy by the entireties, or
				Debtor 1 only Debtor 2 only		Fee Simple		
County				Debtor 1 and D At least one of	Debtor 2 only the debtors and another ou wish to add about this iter	(see instruction		nunity property
				erty identificatio				
	ollar value of the portion			our entries fro	om Part 1, including any e	entries for pages	,	\$102,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

	obto	- 1	Case 17		Doc 1	Filed 06/27/17 Document	Entered 06/2 Page 9 of 52	27/17 11:43:05 Case number (if known)	Desc Main
	ebtor	-	Davis, Evel	_				Case number (ii known)	
		·	s, trucks, trac	tors, sport	utility venic	cles, motorcycles			
	Y	es							
		Make:	Nissan Versa			Who has an interest in the	property? Check one	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
		Model: Year:	2014			■ Debtor 1 only □ Debtor 2 only		Current value of	
		Approx	kimate mileage:		87000	Debtor 1 and Debtor 2 or	nly	entire property?	portion you own?
	Г	Other i	information:		1	At least one of the debtor	s and another		
						Check if this is communicated (see instructions)	nity property	\$5,000	.00 \$5,000.00
		es d the d				or all of your entries from			\$5,000.00
В	ort 21	Door	ribe Your Pers	anal and Ha	usahald Itam			,	
						est in any of the followin	g items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		amples No	d goods and :: Major appliar			ina, kitchenware			ciains of exemptions.
				househ	old furnit	ure			\$900.00
7.	Exa	No	: Televisions a	Il phones, ca	ameras, med	stereo, and digital equipmendia players, games 1 computer,	nt; computers, printer	s, scanners; music collec	tions; electronic devices
8.	Exa	amples No			paintings, prin a, collectibles		, pictures, or other art	objects; stamp, coin, or t	paseball card collections; other
9.	Equ Exa	ipme n a <i>mpl</i> es	nt for sports a			ther hobby equipment; bicy	cles, pool tables, golf	clubs, skis; canoes and l	kayaks; carpentry tools; musical
10	<i>E</i> >	No		es, shotguns	s, ammunition	n, and related equipment			

Official Form 106A/B Schedule A/B: Property page 2

De	ebtor 1	Case 17-1 Davis, Evely		Doc 1		06/27/17 ument	Entered 06/27/ Page 10 of 52	17 11:43:05 se number (if known)	Desc Main
11.	□ No É			leather coats,	designer w	rear, shoes, ac			
		2000	Wearir	ng apparel					\$600.00
_									
12.	■ No		elry, costu	ume jewelry, en	gagement	rings, wedding	g rings, heirloom jewelry, v	vatches, gems, gold,	silver
13.	Example No	m animals les: Dogs, cats, b	irds, hors	es					
	■ No	ner personal and Give specific info			did not al	ready list, ind	cluding any health aids y	you did not list	
	. Add th		of all of yo	our entries fro			y entries for pages you l	have attached for	\$1,900.00
Pa	rt 4: Des	scribe Your Financ	ial Assets	;					
Do	you ow	n or have any le	gal or eq	uitable intere	st in any o	f the followir	ng?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	les: Money you ha	•			·	box, and on hand when yo	ou file your petition	
17.	Examp						deposit; shares in credit ur itution, list each.	nions, brokerage hous	ses, and other similar
	□ No ■ Yes					Institution n	ame:		
			17.1.	Checking A	Account	Chase Ba	nk		\$100.00
			17.2.	Savings Ad	ccount	Chase			\$40.00
18.	_Examp	mutual funds, o les: Bond funds, i				e firms, money	v market accounts		
	■ No □ Yes			Institution or is	suer name	<u>:</u>			
19.	Non-pul	blicly traded sto					porated businesses, inc	cluding an interest in	n an LLC, partnership, and
	■ No	Chro energine to	was called	ما والما والما					
	⊔ Yes.	Give specific info		about them ne of entity:			%	of ownership:	
20.	Negotia	able instruments i	nclude pe	rsonal checks,	cashiers'	checks, promis	gotiable instruments ssory notes, and money or signing or delivering them		

Official Form 106A/B Schedule A/B: Property page 3

■ No

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Case number (if known) Document Debtor 1 Davis, Evelyn ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value.

Dahtand	Case 17-19282		06/27/17 ument	Page 12 of 52 Case number (if known)	Desc Main
Debtor 1	Davis, Evelyn Comp	pany name:		Beneficiary:	Surrender or refund value:
If you a died.	terest in property that is duare the beneficiary of a living and Give specific information			I rance policy, or are currently entitled to receive p	property because someone has
Exam _p ■ No	against third parties, when bles: Accidents, employment Describe each claim			or made a demand for payment to sue	
■ No	contingent and unliquidate Describe each claim	d claims of every natu	ıre, including	counterclaims of the debtor and rights to s	et off claims
■ No	Give specific information	already list			
	the dollar value of all of you 4. Write that number here			y entries for pages you have attached for	\$140.00
Part 5: De	scribe Any Business-Related	Property You Own or Ha	ve an Interest li	n. List any real estate in Part 1.	
	own or have any legal or equit	able interest in any busir	ness-related pro	operty?	
_	o to Part 6. Go to line 38.				
	escribe Any Farm- and Comme you own or have an interest in fa		pperty You Owr	n or Have an Interest In.	
■ No.	Go to Part 7.	equitable interest in a	ny farm- or co	ommercial fishing-related property?	
	Describe All Property You	Dwn or Havo an Interest:	n That Vou Did	Not List Above	
<i>Exam</i> µ ■ No	Describe All Property You Continued to the property of an oles: Season tickets, country Give specific information	y kind you did not alro club membership		NOT LIST ADOVE	

Official Form 106A/B Schedule A/B: Property page 5

\$0.00

54. Add the dollar value of all of your entries from Part 7. Write that number here

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Case number (if known) Debtor 1 Davis, Evelyn

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$102,000.00
56.	Part 2: Total vehicles, line 5	\$5,000.00		_
57.	Part 3: Total personal and household items, line 15	\$1,900.00		
58.	Part 4: Total financial assets, line 36	\$140.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$7,040.00	Copy personal property total	\$7,040.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$109,040.00

Official Form 106A/B Schedule A/B: Property page 6 Case 17-19282 Doc 1 Filed 06/27/17 Entered 06/27/17 11:43:05 Desc Main

Fill in this information to identify your case:						
Debtor 1	Evelyn Davis					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	ON		
Case number (if known)						

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	Part 1:	Identify the Property You Claim as Exempt
--	---------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
15433 Ellis Ave	\$102,000.00	\$15,000.00	735 ILCS 5/12-901
Dolton IL, 60419-2755 Line from <i>Schedule A/B</i> 1.1		☐ 100% of fair market value, up to any applicable statutory limit	
Nissan Versa	\$5,000.00	\$2,400.00	735 ILCS 5/12-1001(c)
2014 87000 Line from <i>Schedule A/B</i> : 3.1		100% of fair market value, up to any applicable statutory limit	
household furniture Line from Schedule A/B. 6.1	\$900.00	\$900.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A/L. U.1		100% of fair market value, up to any applicable statutory limit	
3 flat screen tv's, 1 computer, Line from Schedule A/B 7.1	\$400.00	\$400.00	735 ILCS 5/12-1001(b)
Elle Holli Goreage 7/2 7.1		☐ 100% of fair market value, up to any applicable statutory limit	
Wearing apparel	# 000.00	\$600.00	735 ILCS 5/12-1001(a)
Wearing apparel Line from Schedule A/B: 11.1	\$600.00	— 4000.00	

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Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	Chase Bank Line from Schedule A/B 17.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)		
	Line IIIII Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit			
	Chase Line from Schedule A/B 17.2	\$40.00		\$40.00	735 ILCS 5/12-1001(b)		
Line Irom Schedule A/B. 17.2				100% of fair market value, up to any applicable statutory limit			
3.	 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No 						
	Yes. Did you acquire the property covered	by the exemption within	າ 1,21	5 days before you filed this case?			
	□ No						
	☐ Yes						

	Document	Page 16 of 52		
Fill in this information to identify yo	our case:			
Debtor 1 Evelyn Davis				
First Name	Middle Name	Last Name	- }	
Debtor 2				
(Spouse if, filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for th	e: NORTHERN DISTRICT OF ILL	INOIS, EASTERN DIVISION		
, ,			-	
Case number			- Charle	if their in an
(ii kilowii)				if this is an
			amend	led filing
Official Form 106D				
	ss Who Llove Claims	Coourad by Drapart	2.7	40/45
Schedule D: Creditor	S WIIO Have Claims	Secured by Propert	. <u>y</u>	12/15
Be as complete and accurate as possible				
needed, copy the Additional Page, fill it o known).	out, number the entries, and attach it to t	his form. On the top of any additional	pages, write your name	and case number (if
1. Do any creditors have claims secured	by your property?			
		de adulas. Vair la arra de thine a la a tarra	an ant an thin famor	
<u> </u>	this form to the court with your other so	chedules. You have nothing else to re	eport on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has	s more than one secured claim, list the cred	ditor separately Column A	Column B	Column C
	as a particular claim, list the other creditors		Value of collateral	Unsecured
much as possible, list the claims in alphabe	etical order according to the creditor 's name	e. Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Nationwide Cac LLC	Describe the property that secures the	he claim: \$14,771.00	\$5,000.00	\$9,771.00
Creditor's Name	2014 Nissan Versa			
	As of the date you file, the claim is:	Check all that		
	apply.			
Neverbox Oterat City Otata 9 7in Oada	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as n	mortgage or secured		
Debtor 2 only	car loan)	gage of cood.oa		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)		
☐ At least one of the debtors and another	_ ' '	Silanie 3 lieny		
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 2015-09	Last 4 digits of account numb	per 5270		
		<u> </u>		
2.2 Wells Fargo Hm Mortgag	Describe the property that secures the	ho claim: \$0.4.006.00	¢102 000 00	\$0.00
2.2 Wells Fargo Hm Mortgag Creditor's Name	15433 Ellis Ave Dolton, II 60		\$102,000.00	\$0.00
	13433 Ellis Ave Dolloll, II 00	419		
8480 Stagecoach Cir				
Frederick, MD	As of the date you file, the claim is: (apply.	Check all that		
21701-4747	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as n car loan)	mortgage or secured		
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, med	chanic's lien)		
At least one of the debtors and another	-	Martagas		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Mortgage		
community dest				
Date debt was incurred 2016-06	Last 4 digits of account numb	per _6645		

Official Form 106D

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Debtor 1 Evelyn Davis				Case number (if know)		
	First Name	Middle Name	Last Name			
Add the do	ollar value of vour entrie	es in Column A on this page. \	Write that number here:	\$109.677.00		

\$109,677.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	0430 1	1 10202 2	100	Document	Page 1	8 of 52	0.00 DC	oo wan
Fill in th	is information	to identify your o						
Debtor 1	Fv	elyn Davis						
		Name	Middle N	ame	Last Name		- }	
Debtor 2			AC. 1 11 A1				_	
(Spouse if,	filing) First	Name	Middle N	ame	Last Name			
United S	states Bankrupto	by Court for the:	NORTHERN	DISTRICT OF IL	LINOIS, EAST	TERN DIVISION	_	
Case nu	mher							
(if known)				_				Check if this is an
							a	mended filing
Officia	J Form 100	25/5						
	l Form 100		lha Havra	Linaaaiirad	Claima			40/45
				Unsecured				12/15 ns. List the other party to
Schedule D: Credito the Contin	G: Executory Co ors Who Have Cla	ntracts and Unexpining Secured by Pr	ired Leases (Of operty. If more	ficial Form 106G). D space is needed, c	Oo not include a opy the Part yo	any creditors with parti	ally secured claims per the entries in the	al Form 106A/B) and on that are listed in Schedule boxes on the left. Attach write your name and
Part 1:	List All of Yo	our PRIORITY Un	secured Clain	าร				
1. Do ar	ny creditors have	e priority unsecure	d claims agains	t you?				
■ No	o. Go to Part 2.							
☐ Ye	es.							
Part 2:	List All of Yo	our NONPRIORIT	Y Unsecured	Claims				
3. Do ar	ny creditors have	e nonpriority unsec	ured claims ag	ainst you?				
□ No	o. You have nothi	ng to report in this pa	art. Submit this f	orm to the court with	your other sche	dules.		
■ Ye	es.							
unsed	cured claim, list th	e creditor separately	for each claim.	For each claim listed	d, identify what ty	holds each claim. If a property of claim it is. Do not three nonpriority unsecu	list claims already incl	
								Total claim
4.1	Capital One			Last 4 digits of acc	count number	7566		\$2,609.00
	Nonpriority Credito	or's Name						
	15000 Capita	l One Dr		When was the deb	t incurred?	2015-05		_
	-	A 23238-1119						
1	Number Street Cit	y State Zlp Code		As of the date you	file, the claim i	s: Check all that apply		
'	Who incurred the	e debt? Check one.						
I	Debtor 1 only			☐ Contingent				
I	Debtor 2 only			☐ Unliquidated				
I	Debtor 1 and [Debtor 2 only		☐ Disputed				
I	At least one of	the debtors and and	other	Type of NONPRIOR	RITY unsecured	d claim:		
		claim is for a comr	nunity	Student loans				
	debt Is the claim subj	act to offset?		Obligations arisi report as priority cla		ration agreement or divo	orce that you did not	
	No	COL TO OHSEL!				g plans, and other simila	ır dehts	
				•	*		ii uuula	
ı	☐ Yes			Other. Specify	Revolving	account		_

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Page 19 of 52 Case number (f know) Debtor 1 Davis, Evelyn 4.2 \$2,041.00 Capital One Last 4 digits of account number 0709 Nonpriority Creditor's Name When was the debt incurred? 2015-11 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes 4.3 **Capital One** Last 4 digits of account number 4892 \$619.00 Nonpriority Creditor's Name When was the debt incurred? 2014-12 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Revolving account 4.4 Last 4 digits of account number \$532.00 **Capital One** 6138 Nonpriority Creditor's Name When was the debt incurred? 2016-12 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Revolving account

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Case number (f know)

Debtor 1 Davis, Evelyn 4.5 \$900.00 COMCAST Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P O BOX 3002 **SOUTHEASTERN, PA 19398-3002** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify utility 4.6 **COMED** Last 4 digits of account number \$300.00 Nonpriority Creditor's Name When was the debt incurred? 2100 SWIFT DRIVE OAK BROOK, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utility bill 4.7 Dept of Ed/Navient Last 4 digits of account number 1005 \$7,037.00 Nonpriority Creditor's Name When was the debt incurred? 1988-09 PO Box 9635 Wilkes Barre, PA 18773-9635 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed \square At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Installment account ☐ Yes

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Debtor 1 Davis, Evelyn \$700.00 4.8 Last 4 digits of account number **DTE Energy** Nonpriority Creditor's Name When was the debt incurred? Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify utility bills ☐ Yes 4.9 **ILLINOIS Laboratory Medicine Ass.** Last 4 digits of account number \$550.00 Nonpriority Creditor's Name When was the debt incurred? 3249 Oak Park Ave Berwyn, IL 60402-3429 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical bills ☐ Yes 4.10 **IQ Data International** Last 4 digits of account number \$2,200.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 3568 Everett, WA 98213-8568 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other, Specify collection account

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Debt	Davis, Evelyn	Case number (it know)	
4.11	JH Stroger Hosp Cook Cty Nonpriority Creditor's Name	Last 4 digits of account number	\$5,000.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 70121		
	Chicago, IL 60673-5698		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify medical bills	
	La res	Other. Specify Interior bills	
4.12	LOYOLA UNIVERSITY HOSPI	Last 4 digits of account number	\$2,100.00
	Nonpriority Creditor's Name		Ψ2,100.00
		When was the debt incurred?	
	2160 SOUTH 1ST AVENUE		
	MAYWOOD, IL 60153 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
		·	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	_ ****	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Other Specify hospital bill	
		— Other. Specify	
4.13	Oppity Fin	Last 4 digits of account number 3384	\$1,454.00
	Nonpriority Creditor's Name		¥1,10
	44 E A James 04	When was the debt incurred? 2017-03-07	
	11 E Adams St Chicago, IL 60603-6301		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Installment account	
		— Outon Opeony	

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Case number (f know)

Debtor 1 Davis, Evelyn 4.14 **PEOPLES GAS** \$682.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 130 E. RANDOLPH DRIVE CHICAGO, IL 60601-6207 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify utilities ☐ Yes 4.15 PETER FRANCIS GERACI Last 4 digits of account number \$500.00 Nonpriority Creditor's Name When was the debt incurred? 55 E. MONROE ST. SUITE 3400 CHICAGO, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify legal 4.16 Last 4 digits of account number \$3,547.00 Rise 2553 Nonpriority Creditor's Name When was the debt incurred? 2017-04-25 4150 International Plz Fort Worth, TX 76109-4892 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Installment account ☐ Yes

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Page 24 of 52 Case number (f know) Debtor 1 Davis, Evelyn 4.17 \$499.00 Syncb/Care Credit Last 4 digits of account number 3672 Nonpriority Creditor's Name C/o When was the debt incurred? 2017-02 PO Box 965036 Orlando, FL 32896-5036 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes 4.18 Syncb/Walmart Last 4 digits of account number 7894 \$1,751.00 Nonpriority Creditor's Name When was the debt incurred? 2015-09 PO Box 965024 Orlando, FL 32896-5024 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Revolving account 4.19 Last 4 digits of account number \$2,262.00 **Turner Acceptance Crp** 0621 Nonpriority Creditor's Name When was the debt incurred? 2017-05 5900 Howard St Skokie, IL 60077-2627 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Installment account ☐ Yes

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Debloi	Davis, E	veiyn		Case	number (if know)		
	Webbank/f		Last 4 digits of account number	1392	2	\$2,164.00	
	Nonpriority Cre	editor's Name	When was the debt incurred?	2015	5-04		
	6250 Ridge	ewood Rd			- 	-	
		d, MN 56303-0820 City State Zlp Code	As of the date you file, the claim	ia. Chaol	k all that apply		
		the debt? Check one.	As of the date you me, the claim	is. Check	к ан шат арріу		
	■ Debtor 1 or		☐ Contingent				
	Debtor 2 or	•	☐ Unliquidated				
	_	•					
		nd Debtor 2 only e of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	_		☐ Student loans	a ciaiii.			
	LI Check if the	nis claim is for a community	_	ration ac	greement or divorce that you did not		
		ubject to offset?	report as priority claims	iialioii ag	greement of divorce that you did not		
	■ No		Debts to pension or profit-sharing	g plans,	and other similar debts		
	☐ Yes		■ Other. Specify Revolving	accou	nt		
			· · · · · · · · · · · · · · · · · · ·			- 	
		E HOSPITAL	Last 4 digits of account number			\$15,000.00	
	Nonpriority Cre	editor's Name	When was the debt incurred?				
	1225 LAKE	ST	mon was the dest mounted.			-	
		PARK, IL 60160					
		City State ZIp Code	As of the date you file, the claim	is: Check	k all that apply		
	_	the debt? Check one.					
	■ Debtor 1 or	nly	☐ Contingent				
	Debtor 2 or	nly	☐ Unliquidated				
		nd Debtor 2 only	☐ Disputed				
	☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecured claim:				
		is claim is for a community	Student loans				
	debt Is the claim si	ubject to offset?	Obligations arising out of a separe report as priority claims	ration ag	greement or divorce that you did not		
	■ No	•	☐ Debts to pension or profit-sharing	ıg plans,	and other similar debts		
	☐ Yes		■ Other. Specify hospital bi	lls			
						- 	
Part 3:	List Other	s to Be Notified About a Debt	That You Already Listed				
is tryin have n	ng to collect from	om you for a debt you owe to som	out your bankruptcy, for a debt that y eone else, list the original creditor in you listed in Parts 1 or 2, list the addit submit this page.	Parts 1	or 2, then list the collection agency	here. Similarly, if you	
Part 4:	Add the A	mounts for Each Type of Unse	ecured Claim				
			s. This information is for statistical re	eportina	purposes only, 28 U.S.C. \$159, Add	I the amounts for each	
	f unsecured cl		o. This information is for stational to	oporting.	purposes omy: 20 cicio: 3100: 7100	tino amounto for outin	
					Total Claim		
	6a.	Domestic support obligations		6a.	\$0.00	_	
Total cla from Pa		Taxes and certain other debts y	you owe the government	6b.	\$ 0.00		
	6c.		_	6c.	\$ 0.00	_	
	6d.	Other. Add all other priority unsec	cured claims. Write that amount here.	6d.	\$ 0.00	_	
						_	
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$0.00	_	
					Transfer		
	6f.	Student loans		6f.	Total Claim \$ 0.00		
Total cla	nims				. 0.00	-	
from Pa	art 2 6g.	Obligations arising out of a sep you did not report as priority cl	aration agreement or divorce that	6g.	\$ 0.00		
	6h.		ing plans, and other similar debts	6h.	\$ 0.00	_	

0.00

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Debtor 1 Davis, Evelyn

 Other. Add all other nonpriority unsecured claims. Write that here. 	amount 6i.	52,447.00

Total Nonpriority. Add lines 6f through 6i.

52,447.00

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			III Paue / / ULS/			
Fill in this information to identify your case:						
Debtor 1	Evelyn Davis					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVIS	ION		
Case number (if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number,	whom you have the Street, City, State and ZIP	contract or lease	State what the contract or lease is for	
2.1						
	Name				_	
	Number	Street			_	
	City		State	ZIP Code		
2.2						
	Name					
	Number	Street			_	
	City		State	ZIP Code	_	
2.3						
	Name				_	
	Number	Street			_	
	City		State	ZIP Code		
2.4						
	Name				_	
	Number	Street				
	City		State	ZIP Code		
2.5					_	
	Name					
	Number	Street			_	
	City		State	ZIP Code	_	

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		Docume	ent Page 28 d	of 52
Fill in this	information to identify your	case:		
Debtor 1	Evelyn Davis			
DODIOI 1	First Name	Middle Name	Last Name	}
Debtor 2				
(Spouse if, fili	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTER	RN DIVISION
Case num	ber			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
		. 1. 4		
Sched	lule H: Your Cod	eptors		12/15
■ No □ Yes 2. With California No.		lived in a community pro New Mexico, Puerto Rico,	operty state or territory Texas, Washington, an	/? (Community property states and territories include Arizona
line 2 106D) Colun	again as a codebtor only if the Schedule E/F (Official Form	at person is a guarantor 106E/F), or Schedule G (0	or cosigner. Make sure	f your spouse is filing with you. List the person shown in a you have listed the creditor on Schedule D (Official For se Schedule D, Schedule E/F, or Schedule G to fill out **Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street City	State	ZIP Code	_
3.2				☐ Schedule D, line
<u> </u>	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	7IP Code	

Official Form 106H Software Copyright (c) 1996-2017 CIN Group - www.cincompass.com

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Fill	in this information to id-	entify your cas	se:								
Del	btor 1 <u>E</u>	velyn Davis	:			_					
	btor 2					_					
Uni	ited States Bankruptcy	Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS, EAST	ERN						
	se number nown)			-			☐ An ☐ A s		•	g postpetition ving date:	chapter 13
0	fficial Form 1	06I					MM	// DD/ Y	YYY		
S	chedule I: Yo	our Inco	me								12/1
spo atta	use. If you are separat	ted and your this form. Or mployment	re married and not filin spouse is not filing wit n the top of any additio	h you, do not include nal pages, write your	informa	ation a	about yo	ur spous er (if kno	se. If more	e space is ne wer every qu	eded,
	information.			Debtor 1				_		ling spouse	
	If you have more than attach a separate paginformation about add	e with	Employment status	■ Employed□ Not employed				□ Emplo □ Not er	•		
	employers.		Occupation								
	Include part-time, sea self-employed work.	asonal, or	Employer's name	Visiting Angels							
	Occupation may inclu homemaker, if it appli		Employer's address	1415 Bond St Naperville, IL 605	563-23	88					
			How long employed th	nere? 4 years				_			
Pa	rt 2: Give Details	About Mont	hly Income								
	imate monthly income ess you are separated.	as of the date	e you file this form. If y	ou have nothing to repo	rt for any	y line,	write \$0 ii	n the spa	ce. Include	e your non-fili	ng spouse
•	ou or your non-filing spou ce, attach a separate sh		than one employer, comb n.	oine the information for a	all emplo	oyers f	for that pe	erson on t	he lines be	elow. If you ne	eed more
						1	For Debte	or 1		otor 2 or ng spouse	
2.			, and commissions (be culate what the monthly v		2.	\$_	3,8	76.17	\$	N/A	-
3.	Estimate and list mo	onthly overtin	ne pay.		3.	+\$_		0.00	+\$	N/A	-
1	Calculate gross Inco	ma Add lina	2 ± line 3		4	\$	2 076	: 47	\$	NI/A]

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Debtor	1	Davis, Evelyn		Case	number (if known)		
				For	Debtor 1	For Debto	
C	юр	y line 4 here	4.	\$	3,876.17	\$	N/A
5. L	ist	all payroll deductions:					
_	a.	Tax, Medicare, and Social Security deductions	5a.	\$	944.67	\$	N/A
	b.	Mandatory contributions for retirement plans	5b.	<u> </u>	0.00	\$	N/A
	c.	Voluntary contributions for retirement plans	5c.	<u>\$</u> —	0.00	\$	N/A
	d.	Required repayments of retirement fund loans	5d.	<u> </u>	0.00	\$	N/A
	а. е.	Insurance	5e.	<u> </u>	0.00	\$	N/A
	f.	Domestic support obligations	5f.	<u>\$</u> —	0.00	\$	N/A
	g.	Union dues	5g.	<u>\$</u> -	0.00	\$	N/A
	y. h.	Other deductions. Specify:	5h.+	\$		+ \$	N/A
		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	* \$	944.67	\$ 	N/A
		. ,	7.	* — \$		\$	
/. C	all	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	Φ —	2,931.50	Φ	N/A
	ist a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	92	¢	0.00	¢	N/A
0	L		8a.	» \$	0.00	\$ \$	N/A
_	b. c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b.	»—	0.00	5	N/A
0	C.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
٥	d.	Unemployment compensation	8d.	ς ^Ψ -	0.00	\$	N/A
	u. e.	Social Security	8e.	\$-	0.00	\$	N/A
	f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	*_ \$	0.00	\$	N/A
8	g.	Pension or retirement income	— 8g.	<u> </u>	0.00	\$	N/A
	h.	Other monthly income. Specify:	8h.+	\$		+ \$	N/A
9. A	dd	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10. \$,	2,931.50 + \$_	N/A	A = \$ 2,931.50
Ir o D	nclu the Oo r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avoify:	lependent		•		. + \$ <u>0.00</u>
		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain			,	40	. \$ 2,931.50
13. D)o y	you expect an increase or decrease within the year after you file this form	?				Combined monthly income
		No.					

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Fill	in this information to identify your case:				
Deb	tor 1 Evelyn Davis		Chec	k if this is:	
Dah	tor 2		_	An amended filing	
	ouse, if filing)			A supplement snow expenses as of the f	ing postpetition chapter 13 following date:
Unit	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINGEASTERN DIVISION	OIS,	-	MM / DD / YYYY	
	e number nown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/1
info					
1.	Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses in	for Separate Householdo	of Debtor	2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationsl Debtor 1 or Debtor 2	hip to	Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	son		24	■ Yes
					□ No
					☐ Yes
					□ No □ Yes
					□ res □ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes				
exp	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless your enses as of a date after the bankruptcy is filed. If this is a supple licable date.				
valı	ude expenses paid for with non-cash government assistance if use of such assistance and have included it on Schedule I: Your I ficial Form 1061.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4. \$		855.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$ 4c. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses4d. Homeowner's association or condominium dues		4c. \$		0.00 0.00
5.	Additional mortgage payments for your residence, such as home	ne equity loans	5. \$		0.00

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Debto	^{r 1} Davis, Evelyn	Case num	ber (if known)	
6. l	Jtilities:			
-	Sa. Electricity, heat, natural gas	6a.	\$	222.00
	Sb. Water, sewer, garbage collection	6b.	\$	38.00
	Sc. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	415.00
	d. Other. Specify: AT&T Home Security	6d.	\$	44.00
	Food and housekeeping supplies	— 7.	\$	350.00
	Childcare and children's education costs	8.	\$	0.00
	Clothing, laundry, and dry cleaning	9.	\$	40.00
	Personal care products and services	10.	\$	
	Medical and dental expenses	11.	\$	75.00
	Fransportation. Include gas, maintenance, bus or train fare.	11.	Φ	50.00
	Oo not include car payments.	12.	\$	100.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
4. (Charitable contributions and religious donations	14.	\$	0.00
5. I	nsurance.			
[Oo not include insurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insurance	15a.	\$	0.00
1	5b. Health insurance	15b.	\$	0.00
1	5c. Vehicle insurance	15c.	\$	163.00
1	5d. Other insurance. Specify:	15d.	\$	0.00
ô. T	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
	nstallment or lease payments: 7a. Car payments for Vehicle 1	17a.	\$	295.00
	7b. Car payments for Vehicle 2	17a.		0.00
	• •	17b.	·	
	7c. Other Specify:		•	0.00
	7d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as leducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	Other payments you make to support others who do not live with you.	_	\$	0.00
	Specify:	19.	·	0.00
	Other real property expenses not included in lines 4 or 5 of this form or on Schedu		r Income.	
	20a. Mortgages on other property	20a.		0.00
2	20b. Real estate taxes	20b.	\$	0.00
2	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.		0.00
	Mhan Onait	21.	·	175.00
			- +	173.00
	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	2,922.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		Ψ	
2	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,922.00
3. (Calculate your monthly net income.			
2	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,931.50
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,922.00
2	23c. Subtract your monthly expenses from your monthly income.			0.50
	The result is your monthly net income.	23c.	\$	9.50
F	Do you expect an increase or decrease in your expenses within the year after you for example, do you expect to finish paying for your car loan within the year or do you expect your nodification to the terms of your mortgage? No.			or decrease because of a
	Yes. Explain here:			
	LITES. I EXDIAITITETE.			

modification to the t	ernis of your morigage:
■ No.	
☐ Yes.	Explain here:

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Fill in this informat	tion to identify your	case:				
Debtor 1	Evelyn Davis	Middle Name	Last Name			
Debtor 2					_	
(Spouse if, filing)	First Name	Middle Name	Last Name		2/2	
United States Bankr	ruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS, EAST	ERN DIVISION	<u> </u>	
Case number						
(if known)						Check if this is an amended filing
Official Form	106Dec					
		an Individua	I Debtor's	Schedules	8	12/15
If the married need	le ere filing tegether	, both are equally respo	neible for cumplying	norrest information		
ii two married peop	le are ming together	, both are equally respo	iisible for supplying	correct information.		
		le bankruptcy schedules n connection with a banl				
	I.S.C. §§ 152, 1341, 1		Aruptey case can res	ait iii iiiles up to 4200	,,000, or impris	omment for up to 20
Sign B	Below					
Did you pay o	r agree to pay some	one who is NOT an attor	rney to help you fill o	ut bankruptcy forms	?	
■ No						
☐ Yes. Nan	ne of person					etition Preparer's Notice,
				Declai	ration, and Sign	ature (Official Form 119)
Under penalty	of perjury, I declare	that I have read the sum	mary and schedules	filed with this declar	ation and	
	rue and correct.					
x Eile	M Down	7	x			
Evelyn D Signature			Signatu	re of Debtor 2		
Date Ju	ne 24, 2017		Date			

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		Docume	ent Page 34 of 5	52	
Fill in this informa	tion to identify your	case:			
Debtor 1	Evelyn Davis				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		DIVISION	
Case number					☐ Check if this is an amended filing
					aondod ming

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	102,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,040.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	109,040.00
Pa	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	109,677.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F	\$	52,447.00
	Your total liabilities	\$	162,124.00
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 ochedule I	\$	2,931.50
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,922.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your of	her schedu	les.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a p purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, fan	nily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this ho	ov and subr	nit this form to the

court with your other schedules.

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Page 35 of 52 Case number (if known) Debtor 1 Davis, Evelyn

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,876.17 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in	this informa	tion to identify your	case:			
Debtor	1	Evelyn Davis				
		First Name	Middle Name	Last Name		
Debtor (Spouse	_	First Name	Middle Name	Last Name		
United	States Bank	ruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS, EASTERN DIVI	SION	
Case r	number					
(if known	n)				-	heck if this is an mended filing
	cial Forr	The same of the sa				
State	ement c	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
informa	ation. If mor vn). Answer	e space is needed, every question.		nis form. On the top of any a	jually responsible for supply Idditional pages, write your r	
1. W	hat is your c	urrent marital statu	s?			
	Married					
	Not marrie	ed				
2. Dı	ring the las	t 3 years, have you	lived anywhere other than w	where you live now?		
	No	3.49				
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	all of the places you live	ed in the last 3 years. Do not i	nclude where you live now.		
D	ebtor 1 Prio	r Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					y property state or territory? o, Texas, Washington and Wis	
100	No					
	Yes. Make	sure you fill out Sche	edule H: Your Codebtors (Offi	cial Form 106H).		
Part 2	Explain	the Sources of You	r Income			
Fil	I in the total	amount of income yo	nployment or from operating u received from all jobs and a lave income that you receive to	II businesses, including part-t		ar years?
	l No					
聯	Yes. Fill ir	the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		f current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$21,760.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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De	btor 1 _E	avis, Evely	/n		Cas	e number (if known)	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incom Check all that app	
		ndar year: o December	31, 2016)	Wages, commissions, bonuses, tips	\$24,862.00	☐ Wages, commibonuses, tips	ssions,
				☐ Operating a business		Operating a bu	siness
		ndar year be o December		■ Wages, commissions, bonuses, tips	\$43,000.00	☐ Wages, commi bonuses, tips	ssions,
				☐ Operating a business		☐ Operating a bu	siness
5.	Include in other put you are fi	ncome regard olic benefit pa iling a joint ca source and t	less of whethe yments; pensi se and you ha		ples of other income are alim idends; money collected from gether, list it only once under	n lawsuits; royalties; ar Debtor 1.	ocial Security, unemployment, and digambling and lottery winnings. I
	☐ Yes	. Fill in the de	etails.				
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of incom Describe below.	Gross Income (before deductions and exclusions)
Pa	rt 3: Li	st Certain Pa	vments You	Made Before You Filed for E	Bankruptcv		
6.	□ No.	Neither D	ebtor 1 nor C	s debts primarily consumer bebtor 2 has primarily consumation personal, family, or household personal.	mer debts. Consumer debts	are defined in 11 U.S.	C. § 101(8) as "incurred by an
			90 days befo	re you filed for bankruptcy, did	you pay any creditor a total of	\$6,425* or more?	
		.□ No.	Go to line 7	7.			
		Yes * Subject	creditor. Do payments t		nestic support obligations, su y case.	ich as child support a	and the total amount you paid tha nd alimony. Also, do not include tment.
	■ Yes			r both have primarily consulted you filed for bankruptcy, did		\$600 or more?	
		■ No.	Go to line	7.			•
		□ Yes					id that creditor. Do not include clude payments to an attorney for
	Credito	r's Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	<i>N</i> as this payment for
7.	Insiders which yo	include your r u are an offici	elatives; any ger, director, pe	bankruptcy, did you make a general partners; relatives of an erson in control, or owner of 20° rietor. 11 U.S.C. § 101. Include	y general partners; partnershi % or more of their voting secu	ps of which you are a rities; and any managi	general partner; corporations of ing agent, including one for a
	■ No	liet all sa-	nante ta an i	sider			
		s. List all payn 's Name and	nents to an ins	order. Dates of payme	ent Total amount	Amount you	Reason for this payment
					paid	still owe	• •

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De	btor 1	Davis, Evelyn		Case	e number(if known)		
8.		in 1 year before you filed for bankruptcy,	did you make any payr	nents or transfer an	y property on acc	ount of a debt t	nat benefited an
	insid Inclu	ler? de payments on debts guaranteed or cosigne	ed by an insider.				
	_	No					
	-	No Yes. List all payments to an insider					
	_	der's Name and Address	Dates of payment	Total amount	Amount you	Reason for this	s payment
				paid	still owe	Include creditor	
Pa	t 4:	Identify Legal Actions, Repossessions,	and Foreclosures	,		· · · · · · · · · · · · · · · · · · ·	
9.	List a	in 1 year before you filed for bankruptcy, all such matters, including personal injury cas contract disputes.					tody modifications,
		No					
		Yes. Fill in the details.					
		se title se number	Nature of the case	Court or agency		Status of the c	ase
10.		in 1 year before you filed for bankruptcy, ck all that apply and fill in the details below.	was any of your prope	rty repossessed, for	eclosed, garnishe	d, attached, sei	zed, or levied?
		No. Go to line 11.					
		Yes. Fill in the information below.					
	Cre	ditor Name and Address	Describe the Property		Date		Value of the property
			Explain what happened				p. opo. o
11.		in 90 days before you filed for bankruptc ounts or refuse to make a payment becau		uding a bank or fina	ncial institution, s	et off any amou	nts from your
	_	No					
		Yes. Fill in the details.	Describe Abe sellen Abe		Data a		A
	Cre	ditor Name and Address	Describe the action the	creditor took	taken	ction was	Amoun
12.		in 1 year before you filed for bankruptcy t-appointed receiver, a custodian, or ano		rty in the possessio	n of an assignee f	or the benefit of	creditors, a
		No					
		Yes					
Pa	rt 5:	List Certain Gifts and Contributions					··
13.		iin 2 years before you filed for bankruptc No	y, did you give any gifts	with a total value o	f more than \$600 p	per person?	
		Yes. Fill in the details for each gift.					
		s with a total value of more than \$600 person	r Describe the gifts		Dates the gif	you gave fts	Value
		son to Whom You Gave the Gift and dress:					
14.	With	in 2 years before you filed for bankruptc No	y, did you give any gifts	or contributions wi	ith a total value of	more than \$600	to any charity?
		Yes. Fill in the details for each gift or contrib	ution.				
	mor Cha	ts or contributions to charities that total re than \$600 arity's Name dress (Number, Street, City, State and ZIP Code)	Describe what you	ı contributed	Dates contri		Value
Pa	rt 6:	List Certain Losses					

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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Debtor	1 Davis, Evelyn	Case number (if known)				
ore	gambling?					
0. ;	5a5g .					
	No					
	Yes. Fill in the details.					
	escribe the property you lost and ow the loss occurred	Describe any insurance coverage for the lo Include the amount that insurance has paid. L insurance claims on line 33 of Schedule A/B: F	ist pending loss	Value of property lost		
Part 7:	List Certain Payments or Transfe	rs				
cor	nsulted about seeking bankruptcy or	uptcy, did you or anyone else acting on your preparing a bankruptcy petition? reparers, or credit counseling agencies for service		rty to anyone you		
	No					
	Yes. Fill in the details.					
Ac En	erson Who Was Paid idress nail or website address erson Who Made the Payment, if Not	Description and value of any proper transferred	erty Date payment or transfer was made	Amount of payment		
	eller & Richmond, Ltd.	USC	06/17 and	\$750.00		
33	Biel & Kicilliond, Etd. 3 N Dearborn St Ste 1907 hicago, IL 60602-3828	030	06/24/2017	\$750.00		
pro	thin 1 year before you filed for bankr omised to help you deal with your cre not include any payment or transfer that No Yes. Fill in the details.	uptcy, did you or anyone else acting on your oditors or to make payments to your creditors you listed on line 16.	behalf pay or transfer any prope ?	rty to anyone who		
_ Pe	erson Who Was Paid	Description and value of any prope	erty Date payment or	Amount of		
	idress	transferred	transfer was made	payment		
tra: Incl	nsferred in the ordinary course of yo	s made as security (such as the granting of a sec				
	No					
	Yes. Fill in the details.					
	erson Who Received Transfer didress	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made		
Pe	erson's relationship to you		para m exemange			
	thin 10 years before you filed for ban neficiary? (These are often called asse No	kruptcy, did you transfer any property to a set-protection devices.)	elf-settled trust or similar device	of which you are a		
_	Yes. Fill in the details.					
Na	ame of trust	Description and value of the prope	erty transferred	Date Transfer was made		

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Del	otor 1	Davis, Evelyn			Case numb	er (if known)		
Pai	rt 8:	List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Sto	rage Units			
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shahouses, pension funds, cooperatives, associations, and other financial institutions.								
	_	No						
		Yes. Fill in the details.						
		ne of Financial Institution and ress (Number, Street, City, State and ZIP)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.		ou now have, or did you have within 1 y , or other valuables?	year before you filed for	bankruptcy, an	y safe depo	sit box or other depos	sitory for securities,	
		No						
	_	Yes. Fill in the details.						
		ne of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, and ZIP Code)		Describe t	he contents	Do you still have it?	
22.	Have	you stored property in a storage unit o	or place other than your	home within 1	year before	you filed for bankrupt	cy?	
	_	No Yes. Fill in the details.						
		ne of Storage Facility (ress (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, and ZIP Code)		Describe t	he contents	Do you still have it?	
Pai	rt 9:	Identify Property You Hold or Control	•					
23.								
		No						
		Yes. Fill in the details.						
		ner's Name ress (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe t	he property	Value	
Pai	rt 10:	Give Details About Environmental Info	ormation					
For	the p	urpose of Part 10, the following definition	ons apply:					
	toxic	ronmental law means any federal, state substances, wastes, or material into the rolling the cleanup of these substances	ne air, land, soil, surface					
	Site	means any location, facility, or property operate, or utilize it, including disposa	y as defined under any	environmental la	aw, whether	you now own, operat	e, or utilize it or used to	
	Haza	ardous material means anything an envertal, pollutant, contaminant, or similar t	ironmental law defines	as a hazardous	waste, hazaı	rdous substance, toxi	c substance, hazardous	
Rep	ort all	I notices, releases, and proceedings tha	at you know about, rega	rdless of when	they occurre	ed.		
24.	Has	any governmental unit notified you that	t you may be liable or p	otentially liable	under or in	violation of an enviro	nmental law?	
		No						
		Yes. Fill in the details.						
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental u Address (Number, ZIP Code)			nmental law, if you t	Date of notice	

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De	btor 1	Davis, Evelyn		Case number (if known)		
25.	Have	you notified any governmental unit	of any release of hazardous material?			
	= 1	No		•		
		Yes. Fill in the details.				
		ie of site ress (Number, Street, City, State and ZIP Code	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
26.	Have	you been a party in any judicial or a	dministrative proceeding under any environ	mental law? Include settlements	and orders.	
		No			•	
	□ \	Yes. Fill in the details.				
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	lature of the case	Status of the case	
Pai	rt 11:	Give Details About Your Business of	or Connections to Any Business			
27.	Withir	n 4 years before you filed for bankru	ptcy, did you own a business or have any o	f the following connections to an	y business?	
			d in a trade, profession, or other activity, eith			
	[☐ A member of a limited liability con	npany (LLC) or limited liability partnership (l	LLP)		
	[A partner in a partnership				
		☐ An officer, director, or managing €	executive of a corporation			
		☐ An owner of at least 5% of the voti	ing or equity securities of a corporation			
	II N	No. None of the above applies. Go to	o Part 12.			
	□ Y	· · Yes. Check all that apply above and t	fill in the details below for each business.			
	Business Name		Describe the nature of the business	Employer Identification number		
	Addr (Numb	ress per, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Securit Dates business existed	y number or ITIN.	
28.	Withir	n 2 years before you filed for bankru utions, creditors, or other parties.	ptcy, did you give a financial statement to a	nyone about your business? Incl	ude all financial	
		·				
	_ `	No Yes. Fill in the details below.				
	Name		Date Issued			
	Addr	ress per, Street, City, State and ZIP Code)				
Par		Sign Below			u.*	
l ha true ban	ve read and co	d the answers on this Statement of F orrect. I understand that making a fa	inancial Affairs and any attachments, and I on the line of the lin	ning money or property by fraud	hat the answers are in connection with a	
	elyn C nature	Davis of Debtor 1	Signature of Debtor 2			
Dat	te <u>Ju</u>	une 24, 2017	Date			
Did		tach additional pages to <i>Your Staten</i>	nent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 1	07)?	
	٧o		ot an attorney to help you fill out bankrupto	y forms?		
			ruptcy Petition Preparer's Notice, Declaration, a	nd Signature (Official Form 119).		
Offic	ial Form	n 107 Stat	tement of Financial Affairs for Individuals Filing fo	r Bankruptcy	page 6	

Capital One 15000 Capital One Dr Richmond, VA 23238-1119

COMCAST P O BOX 3002 SOUTHEASTERN, PA 19398-3002

COMED 2100 SWIFT DRIVE OAK BROOK, IL 60523

Dept of Ed/Navient PO Box 9635 Wilkes Barre, PA 18773-9635

ILLINOIS Laboratory Medicine Ass. 3249 Oak Park Ave Berwyn, IL 60402-3429

IQ Data International PO Box 3568 Everett, WA 98213-8568

JH Stroger Hosp Cook Cty PO Box 70121 Chicago, IL 60673-5698 LOYOLA UNIVERSITY HOSPI 2160 SOUTH 1ST AVENUE MAYWOOD, IL 60153

Oppity Fin 11 E Adams St Chicago, IL 60603-6301

PEOPLES GAS 130 E. RANDOLPH DRIVE CHICAGO, IL 60601-6207

PETER FRANCIS GERACI 55 E. MONROE ST. SUITE 3400 CHICAGO, IL 60603

Rise 4150 International Plz Fort Worth, TX 76109-4892

Syncb/Care Credit C/o PO Box 965036 Orlando, FL 32896-5036

Syncb/Walmart PO Box 965024 Orlando, FL 32896-5024 Turner Acceptance Crp 5900 Howard St Skokie, IL 60077-2627

Webbank/fingerhut 6250 Ridgewood Rd Saint Cloud, MN 56303-0820

Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701-4747

WESTLAKE HOSPITAL 1225 LAKE ST MELROSE PARK, IL 60160 Case 17-19282 Doc 1 Filed 06/27/17 Entered 06/27/17 11:43:05 Desc Main Document Page 45 of 52

United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:		Case No.
Davis, Evelyn		Chapter 7
	Debtor(s)	
	VERIFICATION OF CREDI	TOR MATRIX
·		Number of Creditors14
The above-named Debtor(s)	hereby verifies that the list of creditors is	true and correct to the best of my (our) knowledge.
Date: <u>June 24, 2017</u>	Exlyn Dais	4
	Debtor /	
	Joint Debtor	

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Fill in this infor	mation to identify your case:		
Debtor 1	Evelyn Davis		
	First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	ankruptcy Court for the: NORTHERN DIS	STRICT OF ILLINOIS, EASTERN DIVISION	
		<i>p</i>	
Case number (if known)			☐ Check if this is an
			amended filing
Official Fo	orm 108	*	
Stateme	nt of Intention for Indi	viduals Filing Under Chapte	r 7 12/15
	lividual filing under chapter 7, you must fil	Il out this form if:	
_	e claims secured by your property, or sed personal property and the lease has n	ot expired	
You must file th	is form with the court within 30 days after	you file your bankruptcy petition or by the date set for	the meeting of creditors,
whiche the for		e time for cause. You must also send copies to the cre	ditors and lessors you list on
If two married no	eonle are filing together in a joint case, ho	th are equally responsible for supplying correct inforn	nation Roth debtors must sign
	ate the form.	are equally responsible for supplying correct inform	iation. Dotti additoro made signi
Be as complete	and accurate as possible. If more space is	needed, attach a separate sheet to this form. On the to	op of any additional pages,
write y	our name and case number (if known).		
Part 1: List Y	our Creditors Who Have Secured Claims		
1. For any credit	tors that you listed in Part 1 of Schedule D	: Creditors Who Have Claims Secured by Property (Of	ficial Form 106D), fill in the
information b		What do you intend to do with the property that	Did you claim the property
Pur a kanana kanana		secures a debt?	as exempt on Schedule C?
Creditor's	Nationwide Cac LLC	☐ Surrender the property.	□No
name:		Retain the property and redeem it.	
Description of	f 2014 Nissan Versa	Retain the property and enter into a Reaffirmation Agreement.	Yes
property		Retain the property and [explain]:	
securing debt	:		
	Wells Fargo Hm Mortgag	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	Yes
Description of		Retain the property and enter into a Reaffirmation Agreement.	— 163
property	60419-2755	☐ Retain the property and [explain]:	
securing debt	:		
	our Unexpired Personal Property Leases		
		in Schedule G: Executory Contracts and Unexpired Le pired leases are leases that are still in effect; the lease	
		rustee does not assume it. 11 U.S.C. § 365(p)(2).	,
Describe your	unexpired personal property leases	van de la companya d	Vill the lease be assumed?
• • • • • • • • • • • • • • • • • • • •	- State of the Sta		
Lessor's name:			
Official Form 108	Statement of I	ntention for Individuals Filing Under Chapter 7	page

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Debtor 1 Davis, Evelyn	Case number(if known)
Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	☐ Yes ☐ No ☐ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired Jease. X X	perty of my estate that secures a debt and any personal
Evelyn Davis Signature of Debtor 1	re of Debtor 2
Date June 24, 2017 Date	

 $_{B201B\;(Form\;2GBS; P_2/P_9)}\textbf{7-19282}$

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Desc Main

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Northern District of Illinois, Eastern Division

IN RE:		Case No.
Davis, Evelyn		Chapter 7
	Debtor(s)	

	E TO CONSUMER DEBTOR(S) IE BANKRUPTCY CODE
Certificate of [Non-Attorney]	Bankruptcy Petition Preparer
I, the [non-attorney] bankruptcy petition preparer signing the debto notice, as required by § 342(b) of the Bankruptcy Code.	or's petition, hereby certify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	principal, responsible person, or partner of the bankruptcy petition preparer.)
X	(Required by 11 U.S.C. § 110.)
Certificate	of the Debtor
I (We), the debtor(s), affirm that I (we) have received and read the	attached notice, as required by § 342(b) of the Bankruptcy Code.
Davis, Evelyn	X 6/27/2017
Printed Name(s) of Debtor(s)	Signature of Debtor Date
Case No. (if known)	X Signature of Joint Debtor (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Case 17-19282

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B201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:	Case No
Davis, Evelyn	Chapter 7
Debtor(s) CERTIFICATION OF NOTICE UNDER § 342(b) OF THE	
Certificate of [Non-Attorney]	Bankruptcy Petition Preparer
I, the [non-attorney] bankruptcy petition preparer signing the debtor notice, as required by \S 342(b) of the Bankruptcy Code.	's petition, hereby certify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
X	Onsible person, or (Required by 11 U.S.C. § 110.)
Certificate o	f the Debtor
I (We), the debtor(s), affirm that I (we) have received and read the a	ttached notice, as required by § 342(b) of the Bankruptcy Code.
Davis, Evelyn Printed Name(s) of Debtor(s)	X Euly Daw 6/24/2017 Signature of Debtor Date
Case No. (if known)	X Signature of Joint Debtor (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	Davis, Evelyn			Case No.		
			Debtor(s)	Chapter	7	-
	DISC	CLOSURE OF COMPENSAT	ION OF ATTORNEY	FOR D	EBTOR	
С	ompensation paid to m	§ 329(a) and Fed. Bankr. P. 2016(b), I cer ne within one year before the filing of the p of the debtor(s) in contemplation of or in co	petition in bankruptcy, or agree	ed to be paid	d to me, for servic	
	For legal services,	I have agreed to accept	\$		750.00	
	Prior to the filing of	of this statement I have received	\$		750.00	
	Balance Due		\$		0.00	
2. 1	The source of the comp	pensation paid to me was:				
	■ Debtor □	☐ Other (specify):				
3. T	The source of compens	ation to be paid to me is:				
	■ Debtor □	☐ Other (specify):				
‡. I	I have not agreed to firm.	o share the above-disclosed compensation	with any other person unless the	ney are men	nbers and associat	es of my law
[are the above-disclosed compensation with ent, together with a list of the names of the				my law firm. A
5. I	n return for the above-	-disclosed fee, I have agreed to render lega	al service for all aspects of the	bankruptcy	case, including:	
b		tor's financial situation, and rendering advine debtor at the meeting of creditors and cos needed]				bankruptcy;
6. E	By agreement with the	debtor(s), the above-disclosed fee does no	t include the following service	:		
		CERT	IFICATION			
	certify that the forego ankruptcy proceeding.	ing is a complete statement of any agreem	ent or arrangement for paymer	it to me for	representation of	the debtor(s) in
Ju	ıne 26, 2017		/s/ Michael R. Richmond			
Do	ate		Michael R. Richmond Signature of Attorney Heller & Richmond, Ltd.			
			33 N Dearborn St Ste 190)7		
			Chicago, IL 60602-3828 (312) 781-6700 Fax: (312	2) 781-673	2	
			mrichmond@hellerrichm			
			Name of law firm			

ATTORNEY-CLIENT AGREEMENT

This Agreement is made this 17th day of June 2017 by and between Heller & Richmond, Ltd. (hereinafter referred to as "Attorney) of 33 N. Dearborn St., Suite 1907, Chicago, IL 60602 and Evelyn Davis (hereinafter referred to as "Client") of Dolton, IL

WHEREAS, "Client" desires to engage the legal services of "Attorney" to advise and represent "Client" concerning "Client's" desire to seek Bankruptcy relief pursuant to title 11 of the United States Code; and

WHEREAS, "Attorney" desires to provide such legal services to "Client":

IT IS HEREBY AGREED by and between the Parties hereto, in consideration of the mutual covenants contained herein:

TERMS OF AGREEMENT

- 1. Professional Legal Services to be Provided.
- A. Attorney shall provide the following professional legal services for "Client" in the above referenced bankruptcy matter:
 - Analysis of the "Client's" financial situation and rendering advice to the "Client" in determining whether to file a petition in bankruptcy;
 - 2. Preparation and filing of any petition, schedules, statement of affairs, or plan which may be required.
 - 3. Representation of "Client" at the meeting of the creditors and confirmation hearing:
 - 4. Other
- B. Professional legal services to be provided by "Attorney" to "Client shall not include:
 - 1. Rendering advice or representing any other person or entity related to or a dependent of "Client";
 - Filing a notice of appeal, or prosecuting or defending an appeal of any judicial ruling, except by separate agreement of the parties, hereto; or,
 - Representing "Client" in any other judicial or administrative or alternative dispute resolution proceeding, except by separate agreement of the parties, hereto;
 - 4. The filing of any adversary complaint to determine the dischargability of an otherwise non-dischargeable debt.
- 2. Compensation for Legal Service Provided. "Client" agrees to pay to "Attorney" and "Attorney" agrees to accept from "Client" \$ 750 .00 for the performance of these services (hereinafter referred to as "fee") in addition to the costs of approximately three hundred ninety five dollars** (\$395.00)

It is hereby acknowledged that this "fee" has been based upon "Client's" representation that he/she has the following type and number of debts:

- a. -2 secured creditors;
- b. +10 unsecured creditors; (*UP TO 30 UNSECURED CREDITORS)
- c. -0- priority debts; (GOVT. DEBT INCLUDING STUDENT LOAN IS GENERALLY NOT DISCHARGABLE)

This stated "fee" has been further based upon "Client's representation that he/she has:

- a. -0- law suits pending against him/her;
- b. -0- wage assignments pending against him/her.

"Client" agrees to pay an additional fee of one hundred dollars (\$100.00) for each of the following additional items that have not been disclosed above:

- a: each secured creditor;
- b. each group of up to ten unsecured creditors over the first ten unsecured creditors:
- c. each law suit or wage assignment pending against "Client" at the time the bankruptcy is filed;
- d. "Attorney" notification to the Secretary of State of the bankruptcy in the event "Client" s driving privileges had been previously suspended in accordance with the financial responsibility laws of the State of Illinois

"Client" also acknowledges that the "fee" has been determined based upon the minimal amount of expected work to be performed on this bankruptcy matter, and that if additional legal services, such as representing "Client" in contested matters or adversary proceedings, must be performed, if "Client" fails to attend a meeting of the creditors or any court hearing or if the petition, once prepared, has to be revised due to "Client's" failure to provide complete or accurate information, including but not limited to the list of creditors as referred to in Section 5(f) below or if "Attorney" is forced to take any steps to collect any past due Attorneys fees from "Client", "Client" shall be responsible for additional fees at a rate of two hundred fifty dollars (\$250.00) per hour.

"Client" agrees to pay all fees and court costs as follows:

- 1. \$ 250 .00 upon the execution of this agreement;
- 2. Balance due prior to filing, but within 90 days

"Client" acknowledges that "Attorney" is not responsible for filing a petition or initiating any bankruptcy proceeding until "Client" has paid "Attorney" at least \$ 1145 .00 and that any monies paid upon the execution of this agreement are non-refundable and are intended to compensate "Attorney" for his time spent in compiling the information necessary to prepare, or other steps towards the preparation of, a petition in bankruptcy.

3. Client Cooperation. "Client" agrees to fully cooperate with "Attorney" in performing professional legal services, including, but not limited to, fully disclosing all of "Client's" potential assets and liabilities, timely appearing at meetings and hearings, promptly returning phone calls from "Attorney" to "Client", promptly communicating any changes in circumstances to "Attorney", including change of employment and change of address, and paying all legal fees and expenses as they become due. "Client" hereby warrants and covenants that he/she has fully disclosed to "Attorney" all known or suspected real property, tangible and intangible personal property, debts, leases contracts, claims in favor of or against "Client" and taxes owed.

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4. Termination of Agreement.

A. "Client" may terminate this Agreement with "Attorney" at any time upon written notice to "Attorney". In the event of such termination, "Client" shall pay all legal fees incurred and shall notify "Attorney" in writing, if "Client" desires his/her file turned-over to any person or entity.

B. "Attorney" may terminate this Agreement upon written notice to "Client" for "cause". "Cause shall include, but shall not be limited to

the following:

- 1. "Attorney" learning of "Client's" intention to commit an act that may constitute a bankruptcy crime or fraud or other unlawful conduct, and "Client's" refusal to refrain from such conduct;
- 2. "Client's" failure to promptly pay legal fees or expenses incurred; or
- 3. Any other permissive or mandatory cause to withdraw form the Attorney-Client relationship as provided for in the Code of Professional Responsibility.

5. "Client" acknowledgment.

- A. "Attorney" has advised "Client" that his/her spouse, if any is jointly liable for many of "Client's" debts that have been incurred, since the time of "Client's" marriage and that "Client's" spouse can be held responsible for these debts, unless the spouse files a joint or separate petition for bankruptcy. "Attorney" has advised "Client" that there would be no additional legal "fee" or court costs to add the "Client's" spouse on a joint petition for bankruptcy, provided that the spouse does not have any creditors other than those upon which "Client's" fee was based.
- B. "Attorney" has advised "Client" that some debts may not be dischargeable and in particular, secured debts or those in which "Client" has pledged some property as collateral against a loan or other financing, are not dischargeable, unless "Client" is willing to return the property, which has been pledged as collateral, to the creditor. "Client" has been further advised that in many instances he/she may retain the property, which has been pledged as collateral, if he/she agree to reaffirm the debt and continue to pay the creditor, as they were bound to do, before the filing of bankruptcy.
- C. "Attorney" has reviewed with "Client" his/her options to file under Chapter 7, Chapter 11 and Chapter 13 of Title 11 of the United States Code and "Client" has elected to proceed under Chapter 7 "Client" is aware that if he/she proceeds with a Chapter 7 then he/she will be required to forfeit any and all property owned in full or in part by "Client" other than those exemptions permitted by statute and in most instances the amount of property entitled to those exemptions is minimal. The property that could be forfeited includes, but is not limited to real estate, cash, bank accounts, household goods and furnishings, appliances, artwork, collections, sports equipment, tools, jewelry, income tax refunds, vehicles or anything else of value or potential value.
- D. "Client" acknowledges that he/she has read both front and back of this agreement and "Attorney" has answered any questions that "Client" may have had about its content.
 - E. "Client" acknowledges receipt of a copy of this agreement at the time of its execution.
- F. It is the obligation of "Client" to supply "Attorney" with a neat, legible and complete list of all creditors of "Client" and for each creditor include their complete name, address, account number and balance owed; also, if that account was referred to a collection agency or lawyer then also include the name, address and account number of the collection agency or lawyer.
- G. "Client" understands that "Attorney's" obligation to represent "Client" will end no later than upon the entry of the Order of Discharge in Bankruptcy and "Client" will be responsible for payment of additional fees at the rate of two hundred dollars (\$200.00) per hour for any service that might be requested after the entry of the Order of Discharge including but not limited to telephone advise, file retrieval, providing copies of any file related documents and issues concerning credit bureau reports, obtaining credit or other forms of credit repair.
- H. "Glient" hereby warrants and covenants that he/she has truthfully and fully disclosed to "Atterney" all known or suspected information requested by any aspect of the entire Bankruptey Petition and that it is the responsibility of "Client" to be certain that this information is all accurately displayed in the actual Bankruptey Petition at the time "Client" affixes his/her signature(s) thereto.

** costs include the court filing fee of \$335.00, the online prebankruptcy counseling and online debt management class and the 3-bureau credit report of \$60.00 for an individual report or \$70.00 for a joint report for husband and wife.

Heller & Richmond, Ltd.

HELLER & RICHMOND, LTD.

33 N. Dearborn Street

Suite 1907

Chicago, IL 60602

(312) 781-6700

I AGREE TO ALL THE TERMS CONTAINED IN THIS DOCUMENT

By affixing my signature above, I hereby certify that I have not filed any petition for bankruptcy within the past 8 years, except as otherwise noted as follows:

NONE _____

YES, I HEREBY INSTRUCT ATTORNEY TO PROVIDE CLIENT WITH A 3-BUREAU CREDIT REPORT and I AGREE TO PAY THE COST OF THIRTY FIVE DOLLARS (\$35.00) per person FOR THE REPORT IN ADDITION TO ALL OTHER FEES. This additional fee must be paid before the Bankruptcy Petition will be filed.